ISDH 2004 Hospital Service Report

(Annual Report under Indiana Code 16-21-6)

Union Hospital

City: Terre Haute   County: Vigo   Year: **2004**

Provider Type: General Acute Hospital

I. Inpatient Care			
Hospital Service Description	**Number of Set Up Beds**	**Number of Discharges**	**Number of Patient Days**	**Average Charge Per Discharge**
Burn Care	0	0	0	$0
Cardiac Intensive	0	0	0	$0
ICU Med/Surg	32	834	8,606	$14,768
ICU Neonatal	9	166	1,976	$17,122
ICU Pediatric	0	0	0	$0
Medical/Surgical	164	9,413	41,488	$3,454
Neonatal Intermed	0	0	0	$0
Obstetrics	27	1,872	4,029	$1,432
Pediatric	9	452	881	$2,529

Psychiatric	0	0	0	$0
Rehabilitation	0	0	0	$0
Substance Abuse	28	697	8,171	$7,725
Swing Beds	NA	0	0	$0
Other Services	0	0	0	NA
Acute Subtotal	269	13,434	65,151	NA
Normal Newborn	32	1,247	2,602	$1,562

II. Outpatient Visits			
Circulatory System	5,319	Digestive System	5,369
Endocrine System	1,785	Injuries and Poison	13,610
Mental Disorder	1,330	Musculoskeletal	12,742
Neoplasms	4,812	Nervous	5,690
Respiratory	7,830	Urinary	6,766
Other/Unknown	37,419	Total Visits	102,672
Number of Visits to Emergency Department			42,643
Percent of Emergency Department Visits of Total Visits			41.5%

Identification of Hospital Services

Each hospital has identified if it has one or more of a standard list of 66 services. This list of 52 services is updated annually by each hospital from the information initially requested by the Centers for Medicare & Medicaid Services when the hospital was initially certified for Medicare payment. The other 14 services have been identified in other sections of this report.

N - Ambulance Service (Owned)	N - Alcohol/Drug Service	Y - Anesthesia Services
Y - Audiology	Y - Blood Bank	Y - Cardiac Cath Lab
Y - Cardiac-Thoracic Surgery	Y - Chemotherapy Service	N - Chiropractice Service
Y - CT Scanner	N - Dental Service	Y - Dietetic Service
Y - Extracorporeal Lithotripter	N - Gerontological Service	N - Home Health Service
N - Hospice	Y - Laboratory Anatomical	Y - Laboratory Clinical
Y - Magnetic Resonance (MRI)	Y - Neonatal Nursery	Y - Neurosurgical Service
Y - Nuclear Medicine	Y - Occupational Therapy	Y - Operating Room
Y - Opthalmic Surgery	N - Optometric Service	N - Organ Bank
N - Organ Transplant	Y - Orthopedic Surgery	Y - Pharmacy
Y - Physical Therapy	Y - PET Imaging	Y - Postoperative Recovery
N - Psychiatric Emergency	N - Psychiatric Child	N - Psychiatric Forensic
N - Psychiatric Geriatric	Y - Radiology Diagnostic	Y - Radiology Therapeutic
N - Reconstructive Surgery	Y - Respiratory Care	Y - Rehab Inpat CARF
N- Rehab Inpat Non CARF Acc	N- Rehab Outpatient	Y- Renal Dialysis

Y - Social Services	Y - Speech Pathology	Y - Surgical Inpatient
Y - Surgical Outpatient	N - Trauma Center Certified	N - Transplant Cnt Medicare
N - Urgent Care Center		

NA =	Not applicable	NMF =	No meaningful figure	NR =	Not reported

[Health Care Regulatory Services](#)   [2004 Hospital Services Main Page](#)